

Application Data Sheet

Application Information

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| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | None |
| Computer Readable Form (CRF):: | No |
| Number of copies of CRF:: | 0 |
| Title:: | BACTERIAL COMPOSITION PROCESS AND APPARATUS FOR THE PRE- TREATMENT OF EFFLUENTS LOADED WITH FATTY ORGANIC MATTER |
| Attorney Docket Number:: | 0514-1003-1 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 2 |
| Small Entity?:: | No |
| Latin Name:: | |
| Variety Denomination Name:: | |
| Petition Included?:: | No |
| Petition Type:: | |
| Licensed US Gov't Agency:: | |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent | No |
| Appl.?:: | |

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: JAIRO
Middle Name::
Family Name:: FALLA
City of Residence:: METZ
State or Province of Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 1 RUE CHARLES PETRE

City of Mailing Address:: METZ
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 57000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: DANIEL
Middle Name::
Family Name:: MORABITO
City of Residence:: ORLEANS
State or Province of Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 2 PLACE BOEUVÉ-MÉRY

City of Mailing Address:: ORLEANS
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 45000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: GERMANY
Status:: Full Capacity
Given Name:: GUNTER
Middle Name::
Family Name:: GRAF
City of Residence:: MERZING
State or Province of Residence::
Country of Residence:: GERMANY
Street of Mailing Address:: 2 ROSENSTRASSE SCHWEMLINGEN

City of Mailing Address:: MERZING
State or Province of Mailing Address::
Country of Mailing Address:: GERMANY
Postal or Zip Code of Mailing Address:: 66663

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: THIERRY
Middle Name::
Family Name:: SENSENBRENNER
City of Residence:: LINGOLSHEIM
State or Province of Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 1 RUE DES ALOUETTES

City of Mailing Address:: LINGOLSHEIM
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 67380

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE

Status:: Full Capacity
 Given Name:: ASTRIDE
 Middle Name::
 Family Name:: RITTER
 City of Residence:: STRASBOURG
 State or Province of Residence::
 Country of Residence:: FRANCE
 Street of Mailing Address:: 8 RUE GERLINDE

City of Mailing Address:: STRASBOURG
 State or Province of Mailing Address::
 Country of Mailing Address:: FRANCE
 Postal or Zip Code of Mailing Address:: 67200

Correspondence Information

Correspondence Customer Number:: 000466

Representative Information

| | |
|----------------------------------|--------|
| Representative Customer Number:: | 000466 |
|----------------------------------|--------|

Domestic Priority Information

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|------------------|-------------------|----------------------|----------------------|
| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
| This application | National Stage of | PCT/FR01/02486 | 7/27/01 |
| | | | |

Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|---------------|-------------------------|---------------|-----------------------|
| FRANCE | 00/10003 | 7/28/00 | Yes |
| UNITED STATES | 60/290,049 | 5/11/01 | Yes |

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::